

Ranch Asoleado Stables, LLC  
Rider Information and Release of Liability

RIDER NAME \_\_\_\_\_ PRIMARY PHONE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ ALT PHONE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ PARENT/LEGAL GUARDIAN \_\_\_\_\_

Please list All Phone Numbers in Case of Emergency:

EMERGENCY CONTACT \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_, (\_\_\_\_) \_\_\_\_\_, (\_\_\_\_) \_\_\_\_\_

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**Initial each paragraph to indicate your agreement, understanding, and acknowledgment:**

\_\_\_\_\_ Horses are dangerous and unpredictable animals. Any activity undertaken around or near horses can lead to bodily injury or death, even if proper care is taken.

\_\_\_\_\_ Serious injury or death of my horse or pony is possible when it is handled, trained, turned out, chased or in a lesson.

\_\_\_\_\_ I am fully responsible for any guest I may have on the property, for fully informing said guest of all risks relating to handling or riding horses and ponies, for informing said guest about horses' and ponies' temperaments, training and habits and for determining that said guest is sufficiently experienced to ride the horse or pony in question.

\_\_\_\_\_ Equestrian activities engaged in at Rancho Asoleado Stables, hereinafter known as RAS, are solely at my own risk. RAS shall not be liable for injury or death sustained by me while on its premises, whether bodily injury or otherwise. I further acknowledge and agree to release RAS, its agents and employees, from any and all liability for injuries I may sustain on these premises while riding, handling or participating in any way, and agree to indemnify and hold RAS harmless as to any and all claims, actions, damages, costs and expenses attorney's fees and costs arising therefrom.

\_\_\_\_\_ On behalf of myself, my spouse, heirs, legal representatives, assigns, next of kin and Insurers, I hereby release and covenant not to sue RAS, Evan Bishop, cottage tenants, respective officers, managers, trainers, agents or employees, either severally or jointly, from any and all damages, liabilities, causes of action, judgments and claims for personal injury, death and/or property damage arising out of or related to, or in any way connected to the above mentioned property and/or horse(s).

\_\_\_\_\_ The aforesaid release and limitation of liability includes, without limitation, any obligations of RAS with respect to consequential damages and negligent behavior or any of its employees. This agreement shall not be extended, altered or varied except by written instrument signed by both RAS and the student and parent, where required.

\_\_\_\_\_ I give permission to Evan Bishop, dba Rancho Asoleado Stables, and their managers, trainers, agents, employees and associates to initiate emergency first aid treatment by qualified medical personnel for myself or my children, and veterinary treatment by qualified veterinary personnel for my animals.

\_\_\_\_\_ I hereby consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment, and/or any hospital service that may be rendered to me or my family under the general or specific instructions of any physician or hospital. It is understood that this consent is given in advance of any specific diagnosis or treatment which may be required, but is given to encourage the RAS staff, hospital staff and such physician to exercise their best judgment as to the requirements of such diagnosis or treatment. The undersigned shall pay for all fees for doctors, hospitals, ambulances and other charges reasonably and necessarily incurred.

**I HAVE READ AND UNDERSTAND THE FOREGOING:** **DATE** \_\_\_\_\_

RIDER: Print Name \_\_\_\_\_ Sign \_\_\_\_\_

PARENT/LEGAL GUARDIAN: Print Name \_\_\_\_\_ Sign \_\_\_\_\_